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**** CONTINUING DATA *******

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**** FOREIGN APPLICATIONS *******

DP

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>Dea Poun</u> <u>DP</u> Examiner's Signature Initials	STATE OR COUNTRY MN	SHEETS DRAWING 12	TOTAL CLAIMS 79	INDEPENDENT CLAIMS 4
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TITLE
 Authenticated identity translation within a multiple computing unit environment

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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